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# Health Department Division of Environmental Health health.utahcounty.gov

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#### **APPLICATION FOR TEMPORARY FOOD PERMIT**

#### PLEASE COMPLETE ENTIRE APPLICATION FOR 1<sup>ST</sup> TEMPORARY EVENT OF 2020

\*\*FOR ADDITIONAL EVENTS, COMPLETE PAGES 3 & 4 ONLY\*\*

Business Name	Owner Name		Email	
Address	City	State	Zip	Phone #
Booth Name (If different Than Business Name)_				No. Of Booths
Name of worker(s) present at booth with a Food	Handler Card			
Where will you discard wastewater and greas	e?			
How will utensils be supplied to the customer	rs?			
How will your dishes/utensils be washed, ring	sed, and sanitized?			
How will workers wash their hands?				
If you are preparing food before arriving at the second seco	ne event, where will you be making	your food?		
Commissary Required Yes	No			
Name of Commissary	Physical Addre	ss		
Contact Person at Commissary	Commissary Ph	none #		

#### In consideration of granting said permit, I hereby specifically agree to each of the following conditions and waive all objections thereto:

This permit is for one temporary food booth and is non-transferable and non-refundable.

I have read and understand the hand washing requirements.

My menu will not be altered from items listed in this application without approval of UCHD.

I understand all food must be prepared on site or in a permitted kitchen and shall not be prepared in my home.

I understand the following conditions may warrant immediate closure:

- Lack of a current UCHD permit for each event
- Lack of a hand wash station
- Foods prepared at or brought from home
- Critical violations/or imminent health hazards
- Lack of equipment or capacity to hold potential hazardous food at required temperatures

#### **Prohibited Activities:**

- Time as a public health control is not allowed at temporary events
- Eating, drinking, or smoking is not allowed in food booths
- I understand special processes (reduced oxygen packaging, fermentation, curing, sushi without HACCP, etc.) aren't allowed at temporary events.

All businesses operated pursuant to said permit will be conducted and maintained in accordance with all relevant health statute, ordinances, rules and regulations. During the term of said permit, I and my employees will allow Health Department inspectors access to my booth during working hours to conduct inspections as may be necessary to verify compliance with health codes. I specifically waive any right to demand the issuance of a search warrant or other investigative order prior to conducting such inspections.

- Hand wash stations are required to be operational before preparing and serving food
- Permits shall be posted and visible to customers at each booth

#### I understand and agree that violation of this application agreement may result in suspension or revocation of said permit.

Applicant Signature	Applicant Name (Print)		
EHS Approval (Signature)	EHS Name (Print)	Date	

Business Name:	Owner Name:	Phone:
Business Address:	Email:	No of Booths
Event Name:	Event Location:	City:
Event Coordinator:	Coordinator Phone/Email:	Hours:

#### \*Please circle dates of events on calendar below.

## 2020

January	February	March	April	May	June
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
1 2 3 4	1	1 2 3 4 5 6 7	1 2 3 4	1 2	1 2 3 4 5 6
5 6 7 8 9 10 11	2 3 4 5 6 7 8	8 9 10 11 12 13 14	5 6 7 8 9 10 11	3 4 5 6 7 8 9	7 8 9 10 11 12 13
12 13 14 15 16 17 18	9 10 11 12 13 14 15	15 16 17 18 19 20 21	12 13 14 15 16 17 18	10 11 12 13 14 15 16	14 15 16 17 18 19 20
19 20 21 22 23 24 25	16 17 18 19 20 21 22	22 23 24 25 26 27 28	19 20 21 22 23 24 25	17 18 19 20 21 22 23	21 22 23 24 25 26 27
26 27 28 29 30 31	23 24 25 26 27 28 29	29 30 31	26 27 28 29 30	24 25 26 27 28 29 30	28 29 30
				31	
July	August	September	October	November	December
S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S	S M T W T F S
1 2 3 4	1	1 2 3 4 5	1 2 3	1 2 3 4 5 6 7	1 2 3 4 5
5 6 7 8 9 10 11	2 3 4 5 6 7 8	6 7 8 9 10 11 12	4 5 6 7 8 9 10	8 9 10 11 12 13 14	6 7 8 9 10 11 12
12 13 14 15 16 17 18	9 10 11 12 13 14 15	13 14 15 16 17 18 19	11 12 13 14 15 16 17	15 16 17 18 19 20 21	13 14 15 16 17 18 19
19 20 21 22 23 24 25		20 21 22 22 24 25 26	18 19 20 21 22 23 24	22 23 24 25 26 27 28	20 21 22 23 24 25 26
	16 17 18 19 20 21 22	20 21 22 23 24 25 26	10 19 20 21 22 23 24	22 23 24 23 20 21 20	20 21 22 23 21 23 20
26 27 28 29 30 31	16 17 18 19 20 21 22 23 24 25 26 27 28 29	20 21 22 23 24 25 26 27 28 29 30	25 26 27 28 29 30 31	29 30	27 28 29 30 31

Fee Schedule (The following will be completed by UCHD)

1-14 Day Event □ \$75 X = \$ Additional Event □ \$20 X = \$	Permit Fee Late Fee - Less Than 4 business Days (\$25) Total Amount Due Payment Date: Cash	\$ \$ \$ Credit/Debit \[
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#### FOOD PREPARATION AND MENU

Where will food be purchased? (Examples: Costco, Sam's Club)

- Menu: Only food/menu items listed below will be approved to serve. Approval for any changes must be requested before the event.
- Any foods that require cooling must be done at an approved kitchen. Cooling hot food is not allowed at a temporary event.
- Temperature Control: Any food found in the Danger Zone above 41°F and below 135°F will be discarded.
- Time as a public health control is prohibited at temporary events.

MENU: Complete the table below. List all foods, beverages, and condiments that will be served. Use additional paper as needed.

Menu Item	How is food purchased at store? (raw or pre-cooked)	Prepared in booth or approved kitchen?	Transport item hot or cold? What type of equipment for transport?	Cold holding equipment used at event? (41°F or below)	Cooking/reheating equipment used? Final cook/reheat temperature?	Hot holding equipment used? (135°F or above) *Sterno not allowed
Example: <u>Hamburger</u>	Raw	<u>Booth</u>	Cold Ice Chest	Ice Chest	Grill 155°F	Grill/Steam Table

### **Temporary Food Event Permit Requirements:**

- ➤ Temporary operator **must** check each employee for symptoms before every shift and asks if any member of the employee's household has tested positive for COVID-19 in the past 14 days. Log **must** be kept and available for inspection by the local health officer
- > Staff **must** wear face coverings at all times and perform strict hand hygiene
- > Cups, lids, napkins, and straws **must** be handed directly to customers by staff
- ➤ Must **NOT** operate if PPE, EPA-approved disinfectants and sanitizers, soap, water supply for handwashing, and other necessary cleaning supplies are not available; sanitizer is effective against COVID-19. Chlorine (bleach) at 100-200 ppm is recommended
- > To-go boxes, pizza boxes, paper cups, and any other paper product that touches food **must** be treated as food
- > Staff **must** use gloves when handling ready-to-eat foods (including ice). Gloves are not required when handling foods that have yet to be cooked
- Encourage contactless and non-signature payment; when not possible, card and payment stations must be sanitized after each use. Staff must sanitize hands between handling payment options and food/containers
- Maintain signage to remind individuals from separate parties to stand at least 6 feet apart; waiting area has ground markers to indicate proper spacing
- > Must provide a written plan demonstrating how these requirements will be met.